PTO/SB/22 (12-04)

Approved for use through 10/31/2002. OMB 0651-0031

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PE	TITION F	OR E	XTENSION OF TIME UNDE	R 37 CFR	1.136(a)	Docket Number 2516.ST	· · · · · · · · · · · · · · · · · · ·		
App	lication Nun	nber	10/795,805		Filed	March 8	, 2004		
For TURBO SYSTEM AND METHOD OF INSTALLING									
Art l	Jnit 374	8			Examiner	Thai B	a Trieu		
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified									
	The requested extension and fee are as follows (check time period desired and enter appropriate fee below):								
FER 1	8 2006			<u>Fee</u>	Fee Small Entity Fee				
		One n	nonth (37 CFR 1.17(a)(1))	\$120		\$60	\$		
MAD	EMARK O	Two n	nonths (37 CFR 1.17(a)(2))	\$450		\$225	\$		
	⊠	Three	months (37 CFR 1.17(a)(3))	\$1020)	\$510	\$ <u>510</u>		
		Four r	months (37 CFR 1.17(a)(4))	\$1590)	\$795	\$		
		Five N	Month (37 CFR 1.17(a)(5))	\$2160)	\$1080	\$		
⊠	Applicant c	laims s	mall entity status. See 37 CFR 1.27.			*********	ATOFOAF		
	02/24/2006 EFLORES 00000040 10795805 A check in the amount of the fee is enclosed. 01 FC:2253 510.00 DP								
⊠	Payment by	, credit	card. Form PTO-2038 is attached.						
	The Directo	or has a	already been authorized to charge fees	in this applicat	tion to a Dep	osit Account			
Ø									
Iam	the		applicant/inventor						
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).									
		⊠	attorney or agent of record. Registr	ation Number	40,567		-		
	attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a)								
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.									
2-13-06									
Signature									
	Frank W. Compagni				(801) 478-0071				
Typed or printed name Telephone Number									
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.									
☑ Total of forms are submitted.									

PTO	/SR	/17	112	-041

Small Entity

Fee (\$) 25

100

180

Fee Paid (\$)

Fees Paid (\$)

\$510

(801) 478-0071

65

80

300

0

Fee (\$)

Fee (\$)

Telephone

Date

Fee (\$)

50 200

360

Small Entity

Multiple Dependent Claims

130

160

600

0

							PTO/SB/17_(12-0	
		SIB	Complete if Known					
CCC TD	ANICHMET	VI E	Application Number	er 10/79	95,805			
	ANSMITT	4	Filing Date	Marc	h 8, 2004			
for F	TY 2095	1 8 2008	First Named Inven	tor Richa	ard K. Squires			
Applicant claims small	entity status. 30237 CF	R 1.27	Examiner Name	Thai	Ba Trieu			
TOTAL AMOUN	NT OF	BANKA OF	Art Unit	3748				
PAYMENT (\$)			Attorney Docket N	o. 2516	2516.STS.CN			
METHOD OF PAYN	IENT (check a	ll that apply	()					
☑ Check	☐ Credit Care	<u> </u>	☐ Money Order	□ None	□Other (please	identify):		
☑ Deposit Account	Deposit Accou	int Number: _	50-0881 Dep	oosit Account l	Name: Morriss C)'Bryant Coı	npagni, PC	
For	the above-ide	ntified depos	sit account, the Dire	ctor is hereby	authorized to: (che	ck all that apply)	
☐ Charge fee	(s) indicated be	low		☐ Charg	e fee(s) indicated b	elow, except for	the filing fee	
	additional fee(R 1.16 and 1.1		payments of fee(s)	⊠ Credit	any overpayments			
FEE CALCULATION	N							
1. BASIC FILING,	SEARCH, AND	EXAMINAT	ION FEES					
	FILING	FEES	SEARC	H FEES	EXAMINAT	ION FEES		
Application Type	Fee (\$)	Small Entity Fee (\$)	У <u>Fee (\$)</u>	Small Entity Fee (\$)	<u>Fee (\$)</u>	Small Entity Fee (\$)	Fees Paid (\$)	
Utility	300	150	500	250	200	100		

100

300

500

Fee (\$)

Fee (\$)

50

150

250

0

Fee Paid (\$)

Fee Paid (\$)

Number of each additional 50 or fraction

thereof

40,567

(round up to a whole number) x

Design

Reissue

Provisional

Fee Description

Total Claims

Indep. Claims

2. EXCESS CLAIM FEES

Multiple Dependent claims

3. APPLICATION SIZE FEE

Total Sheets

4. OTHER FEE(S)

SUBMITTED BY

Signature

Name (Print/Type)

Plant

200

200

300

200

-20 or HP= HP= highest number of totals claims paid for, if greater than 20

-3 or HP

HP= highest number of independent claims paid for, if greater than 3

-100=

Frank W. Compagni

100

100

150

100

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

Extra Claims

Extra Claims

Extra Sheets

Other: Extension of Time Petition (3 months)

Each independent claim over 3, or for Reissues, each independent claim more than in the original patent

_ X _

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35. U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s)

Registration No.